



3624
PRW

AMENDMENT TRANSMITTAL LETTER				Docket No. 58985(49357)																																											
Application No. 10/086,769-Cont. #8954	Filing Date March 1, 2002	Examiner J. Patel	Art Unit 3624																																												
Applicant(s): Joseph M. Kochansky																																															
Invention: INVESTMENT PROTFOLIO COMPLIANCE SYSTEM																																															
TO THE COMMISSIONER FOR PATENTS																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1"> <thead> <tr> <th colspan="6">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>36</td> <td>- 36 =</td> <td>0</td> <td>x 50.00</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>5</td> <td>- 5 =</td> <td>0</td> <td>x 200.00</td> <td>0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td colspan="2"></td> </tr> <tr> <td colspan="4">Other fee (please specify):</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td colspan="2">0.00</td> </tr> </tbody> </table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	36	- 36 =	0	x 50.00	0.00	Independent Claims	5	- 5 =	0	x 200.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00	
CLAIMS AS AMENDED																																															
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																																											
Total Claims	36	- 36 =	0	x 50.00	0.00																																										
Independent Claims	5	- 5 =	0	x 200.00	0.00																																										
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																															
Other fee (please specify):																																															
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00																																											
<input checked="" type="checkbox"/> Large Entity		<input type="checkbox"/> Small Entity																																													
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
Dated: <u>April 12, 2007</u>																																															
Scott D. Wofsy Attorney/Agent Reg. No.: 35,413																																															
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (203) 353-6831																																															
<small>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</small>																																															
Dated: April 12, 2007 Signature: <u>Edith Sillman</u> (Edith Sillman)																																															

(49357)58965



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Joseph M. KOCHANSKY)
Serial No.: 10/086,769) Group Art Unit: 3693
Filing Date: March 1, 2002) Examiner: Jagdish Patel
Title: INVESTMENT PORTFOLIO) Confirmation No. : 8954
 COMPLIANCE SYSTEM)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the Restriction Requirement mailed March 29, 2007, please enter the following remarks.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Date: April 12, 2007



Edith Sillman